## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PAF	10385	
O.I.P.E. CLASSIFIER			5-414-17
FORMALITY REVIEW		10079	Klibel
RESPONSE FORMALITY REVIEW			1/// -/ - 1
			1112502

## **INDEX OF CLAIMS**

~	Rejected	N	Non-elected
	Allowed	1	Interference
	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

- Instituted 0					
Claim Date	Claim Date	Clair	m Date		
Final Original 9/1/63 49 1/2/70 1/2/1	Final	Final	Original		
	51		101		
2///=	52		102		
73///=	53	<u> </u>	1003		
04//=	54		104		
5///=	55		106		
6 // /=	56		106		
7///=	57		107		
8 / / /=	58	<del>4_ - - - - </del> - -	108		
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10 ////	60		10		
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12////	62		112		
13 / / /	63	<del></del>	113		
14 / / /	64		114		
15 ///	65		115		
16 17 1 1	66		116		
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18 / / =	68	<del></del>	118		
19 / / /=	69	<del></del>	<del>''' - - - - - - - - - - -</del>		
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22 / / / =	72		122		
23 / / /=	73		123		
24 / / /=	74	<del></del>	124		
25	75		125		
26	76		126		
27	77		127		
28	78	1 1 1 1 1 1 1 1	128 1		
29	79		130		
30	80		131		
31	81		132		
32	82		133		
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34 35	85	<del>┤┤╏</del>	135		
36	86	<del>╂┼╋╏</del> ┪╟┥	136		
37	87		137		
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411.	92	<del>╎╸┩╸╏╸┦</del> ╸┞╾	142		
42 /		╃╼┼╂╌┼═┤┈┞═	143		
	93	<del>┤═┞╶┞╶╏</del> ╴┞╼	144		
44 45	95	╅╅╅┪┝	145		
46	96	<del>┤╸</del> ┤┤┼╾┩╸┠╾	146		
47	97	┼┼┼┤┞	147		
48	98	<del>┤</del> ┼┼┼┥┝╸	148		
49	99	<del> - - - - </del> - -	149		
50	100	<del>                                     </del>	150		
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If more than 150 claims or 10 actions staple additional sheet here

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